DECLARATION AND POWER OF ATTORNEY Utility Application

LYON & LYON DOCKET <u>224/053</u>

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name and signature.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled <u>BODY FLUID FLOW CONTROL DEVICE</u>, the specification of which was filed on September 16, 1997 as Application Serial No. 08/931,552.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment(s) referred to above. I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(1).

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application.

Application No.	Date of Filing	Status-Patented, Pending or Abandoned
-		

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements are made with the knowledge that willful false statements

and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Send Correspondence to: LYON & LYON 47th Floor, 633 W. Fifth St. Los Angeles, CA 90071-2066

Direct Telephone Calls to:

<u>John D. McConaghy, Reg. No. 26,773</u>
(213) 489-1600

201	FULL NAME OF	FIRST Name	Middle Initial(s)	LAST Name				
		GHOLAM-REZA		ZADNO-AZIZI				
		Signature of Inventor AAA		2 - 18 - 98				
	RESIDENCE & CITIZENSHIP	City	State or Foreign Country	Country of Citizenship France				
		Newark	California					
	POST OFFICE ADDRESS	Street Address	City	State or Ctry	Zip Code			
		8213 Del Monte Avenue	Newark	CA	94560			
202	FULL NAME OF	FIRST Name	Middle Initial(s)	LAST Name				
		JOHN ,	s.	FORD				
		Signature of Uventor		Country of Citizenship				
	RESIDENCE & CITIZENSHIP	City	State or Foreign Country					
		Manhattan Beach	CA	U.S.				
	POST OFFICE ADDRESS	Street Address	City	State or Ctry	Zip Code			
		319 30th Street	Manhattan Beach	CA	90266			
202	202 FULL NAME OF FIRST Name INVENTOR		Middle Initial(s)	LAST Name				
		APRIL		MARANO-FORD				
		Signature of Inventor Sullivaria Sullivaria		2-18-98 ·				
	RESIDENCE & CITIZENSHIP	City	State or Foreign Country	Country of Citizenship U.S.				
		Manhattan Beach	CA					
	POST OFFICE ADDRESS	Street Address	City	State or Ctry	Zip Code			

Manhattan Beach

319 30th Street

CA

90266